## INDIAN COUNCIL OF HISTORICAL RESEARCH 35, Ferozeshah Road, New Delhi-110001

## (Reimbursement of Children Education Allowance and Hostel Subsidy)

## **APPLICATION FORM**

Name o	f the employee (in BLO	CK Letters):		_ Perm-ID:
Designa	ation:	Dept	t:	
	f the employee (in BLOCK Letters): Perm-ID: ttion: Dept: y apply for the reimbursement of Children Education Allowance for my child, relevant particulars nished below:- (a) Name of the Child (in BLOCK Letters): (b) Date of Birth: (a) Name and Address of the School in which studying: (b) Class in which studying: (b) Class in which studying: Details of Children Education Allowance (CEA) Claimed already in earlier quarters: Quarter of Year : Academic Year : Amount Claimed : Sept. to Nov. : Sept. to Nov. : March to May : The quarter of year for which the Children Education Allowance is applied now: Quarter of Year : Academic Year : Murcher the Child for whom Children Education Allowance applied is disabled Child? Yes/No If yes, indicate the nature of disability: Indicate the percentage of disability: Date of disability certificate:			
1	(a) Name of the Child (	in BLOCK Letters):		
	(b) Date of Birth:			
2	(a) Name and Address	of the School in which stud	ying:	
	(b) Class in which study	ving:		
3.		•		
			-	-
	-			
		:		
	-	:		
	-	:		
	March to May	:		
4.	•	which the Children Educat	ion Allowance is applied 1	now:
(i)	Quarter of Year	•		
(ii)	Academic Year	:		
<b>5.</b> (a)	Whether the Child for w	whom Children Education		
	Allowance applied is di	sabled Child?		Yes/No
(b)	If yes, indicate the natu	re of disability:		
(c)	Indicate the percentage	of disability:		
(d)	Date of disability certif	icate:		
				<i>.</i>

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**6**. (a) Details of expenses incurred towards School Fee/for purchase of Text Book and Note Books, Uniforms & Shoes and for which reimbursement of Children Education Allowance now:

S.No.	Description of Fee Paid	Receipt No.	Amount (in `)
1	Tuition Fees		
2	Admission Fees		
3	Special Fee Charged for Agriculture Electronics, Music or any other Subject		
4	Fee charged for practical work under the programme of work experience		
5	Fee paid for the use of any aid of Appliance by the Child		
6	Games/Sports Fee		
7	Laboratory Fee		
8	Library Fee		
9	Fee for extra Curricular Activities		
10	Expenses incurred for One set of Text Books and Note Books		
11	Expenses incurred for Two set of Uniforms		
12	Expenses incurred for One set of School Shoes		
	1	TOTAL `	

(b) Total Amount of Children Education Allowance Claimed `\_\_\_\_\_.

7. Details of Cash Receipt No./Counterfoil of Bank Challan/Credit Voucher No.\_\_\_\_

- 8 (i) Certified that the Fee/Amount indicated above had actually been paid by me.
  (ii) Certified that my Wife/Husband is/is not a Central Government Servant.
  (iii)Certified that my Husband/Wife Shri/Smt. \_\_\_\_\_\_\_ is presently working as \_\_\_\_\_\_\_ and that He/She will not apply/has not applied for the Children Education Allowance for the child mentioned above.
- **9.** Certified that I or my Wife/Husband has not claimed and will not claim the Hostel Subsidy in respect of the child mentioned above.
- **10.** Certified that my child in respect of whom reimbursement of Children Education Allowance applied is studying in the school/junior college which is recognized and affiliated to \_\_\_\_\_\_ Board of Education/University.
- 11. The particulars/information furnished above are complete and correct and I have not suppressed any relevant information. In the event of any change in the particulars given above which affect my eligibility for reimbursement of Children Education Allowance, I undertake to intimate the same promptly and to refund excess payments, if any made. Further I am aware that if at any stage the information/documents furnished above is found to be false I am liable for disciplinary action.

Details of documents enclosed:

(Signature of employee)

Dated:

Entered in re-imbursement of Children Educational Allowance Controlling Register on Page no\_\_\_\_\_ and S.No. \_\_\_\_.

DD (Admn)/S.O.(Admn.I)